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AUTHOR	Donohue, Deirdre A.
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ABSTRACT

The Project Library was established to serve chronic, mentally ill patients forty-five years and older by ascertaining their library needs and interests, as well as by developing specific library program formats for people who have been isolated from the community for long periods of time. To do this effectively, various levels of institution staff had to be involved simultaneously and on a regular basis. Furthermore, it became necessary to accept older patients as individuals with specific interests, responses, and attention needs. The books selected for this age group consisted mostly of illustrated non-fiction. In addition, fiction, large type, paperbacks, magazines and newspapers were used. Non-print materials included filmstrips, kits, records, film loops, 8mm and 16mm film, as well as simple games and puzzles. The library became an active place patronized by many older people from the open and closed areas, with most of the materials, print and non-print, in some way utilized by them. A program of library service evolved which offered a variety of activities and choices, thereby appealing to the wide range of individual differences among elderly patients. (Author)

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Final Report

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Deirdre A. Donohue

R. I. Department of State Library Services

Providence, Rhode Island

November, 1973

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Deirdre A. Donohue
R. I. Department of State Library Services
95 Davis Street
Providence, Rhode Island 02908

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SUMMARY

The Project Library was established to serve chronic, mentally ill patients forty-five years and older by ascertaining their library needs and interests, as well as by developing specific library program formats for people who have been isolated from the community for long periods of time. To do this effectively, various levels of institution staff had to be involved simultaneously and on a regular basis. Furthermore, it became necessary to accept older patients as individuals with specific interests, responses, and attention needs. The books selected for this age group consisted mostly of illustrated non-fiction. Moreover, fiction, large type, paperbacks, magazines and newspapers were used too. Non-print materials included filmstrips, kits, records, film loops, 8mm and 16mm film, as well as simple games and puzzles. The library became an active place patronized by many older people from the open and closed areas, with most of the materials, print and non-print, in some way utilized by them. A program of library service evolved which offered a variety of activities and choices, thereby appealing to the wide range of individual differences of elderly patients.

INTRODUCTION

The Project Library was established to serve chronic, mentally ill patients forty-five years and older who had been institutionalized for many years at the Institute of Mental Health. These older people were designated as chronic because of the length of their institutionalization. At the time the library service began, several on-going programs were in existence which included many of the people in the targeted age group. Among these were recreational programs, on and off the grounds, and a well planned and organized program of Occupational Therapy which includes specific programs in some of our targeted buildings, as well as, an active sheltered workshop program. Moreover, there is a concerted effort to move many of the patients in the targeted population group into selected boarding homes in the community. Also, a behavior modification program exists in two of the buildings which house some patients in the age group. Therefore, library service had to reach patients who were not participating, for a variety of reasons, in already established programs; or compete for the time of those patients assigned to other programs.

The objectives of the Project were:

To ascertain the library needs and interests of groups of elderly, mentally ill patients.

To develop specific library program formats for people who have been isolated from the community for long periods of time.

To find out information regarding subject interest, response to a diversity of print and non-print materials including books, newspapers, magazines, films, media kits, and film strips.

To determine the best methods for involving select institutional staff in the implementation of library service for patients.

To conduct workshops where information regarding reader interest, program format, response, materials, and equipment used would be shared with librarians, trustees, administrators, volunteer workers and students.

INTRODUCTION - PLANNING

The original planning for this project was a four month period starting on July 1, 1972. This was the earliest practical date with recruitment of staff after the grant award was made.

At the inception of the planning period, two changes from the original proposal were made. Miss Deirdre A. Donohue, Institutional Librarian at the Department of State Library Services, who was named as Project Director, resigned her position with the Department to take the position of Project Librarian. Mrs. Miriam Haas, Chief of Special Services for the Department of State Library Services was then named as Project Director. A short time later, Mrs. Haas announced her intention to retire and Richard Waters, Chief, Division of Planning and Development for the Department of State Library Services, assumed the position of Project Director and remained in this capacity until the end of the grant period.

The final staff roster consisted of Richard J. Waters, Project Director; Deirdre A. Donohue, Project Librarian; John McCabe, Library Technician; Dorothy A. Moretti, Library Clerk.

To assist with the planning effort, a Planning Group consisting of staff members of the Institute of Mental Health was organized. The following staff members from the Institute of Mental Health are:

Dr. John Karkalas, Assistant Chief of Psychiatric Services
Dr. Elizabeth Socha, Chief Clinical Psychologist
Mrs. Charlotte Pellini, Chief of Social Services
Mrs. Marguerite Burns, Supervisor, Occupational Therapy
Mrs. Louise Baran, Assistant Supervisor of Nursing Services
Mr. Patrick Brown, Associate Hospital Administrator

The assistance of this group was invaluable and it enabled the Project Staff to avoid mistakes and to shorten the planning period. An important component of this planning period was the involvement of the staff at the Institution.

Early in July, a meeting was held by the Project Director and the Project Librarian with all supervisory staff of the Institution. Included in this meeting were people from the hospital, administrative and maintenance areas of the Institution. The aims and goals of the Project were explained and help was solicited from the Institution personnel. A second meeting was held a week later with clinical and nursing personnel. This second meeting was

followed by visits to each building where the Project Librarian met with supervisory and ward personnel.

This series of meetings was very crucial to the Project, for three reasons. First, a careful and detailed explanation of the Project and its parameters, as well as a free exchange of questions and answers, removed any threat that the proposed library was in competition with any established operation within the hospital. Secondly, the Project Librarian's status within the Institution was established by participation in regularly scheduled staff meetings. Lastly, it emphasized the three way cooperation of the Federal government and two State agencies.

During the planning phase three other activities were carried out. Structured program models were developed (see Exhibit 1). Four basic types of program models were decided on. They were programs dealing just with print materials, multimedia programs, and programs with a combination of print materials and arts and crafts. A second activity was the development of evaluation checklists. Three checklists were developed (Exhibits 2, 3 and 4). Two of the checklists were for individuals and the third was for program evaluation. The Project Staff would fill in one patient evaluation checklist and the program evaluation checklist. Ward supervisors were to fill in a patient evaluation checklist. Two other monitoring devices were used. The Project Staff kept a daily diary of events and the Project Librarian wrote out a weekly summary of events in the library.

Another major activity was the selection and ordering of materials, equipment and furniture. The Institution Planning Staff was of great assistance in the selection of furniture. Based on their knowledge of the behavioral patterns, habits and infirmities of the patients, the furniture selected met four conditions. It was light enough in weight so that it could be moved easily; was sturdy enough so that it offered a person support when getting up; it was not easily soiled and could be cleaned easily; and it did not resemble institutional furniture. As an innovation, 4 Boston rocking chairs were purchased. These rocking chairs had a great deal to do with the success of the Project. This statement is rather hard to explain but these rocking chairs seemed to act in a transitional role and ease patients into a new and what was for many, a first time experience.

INTRODUCTION - PLANNING

At this point, some mention of the library facility should be made. The first area selected for the library proved to be unsuitable and a second site was chosen. The library is located on the second floor of A Building. It encompasses about 10,000 square feet, with a separate area for film showings, storage closets, a large office and workroom and a lavatory area. The Institute of Mental Health remodeled the area to meet the specifications of the Project Librarian. The building has an elevator which can be used by patients.

Because of the cooperation of the Institution and the experience of the Project Staff, approval was given by the Division of Library Programs, USOE, to cut the planning phase from four months to three. As a result of this, the first library programs were given on October 10, 1972.

PROCEDURES

A. LEVELS OF STAFF INVOLVEMENT

Involvement of institution staff on many levels simultaneously is essential if the patients' library is to have a viable function in an institution for the mentally ill. This is especially so if the institution is a multi-building facility, spread over a large area. (The Institute of Mental Health has 37 buildings spread over many acres of land.) However, this is much more complicated than it would seemingly appear. First, the administration must be approached and the librarian assigned a proper place in the administrative chain. Library matters must be discussed at least on a regularly scheduled basis at staff meetings. It was fortunate that the administration of the Institute of Mental Health believed in a professional library service for patients prior to the time the original Proposal was written. At the Institute of Mental Health, Nursing Services is responsible for the administration of residential buildings.

It was necessary to establish a working relationship with Building and Nursing Supervisors in each residence housing chronic mentally ill patients. Periodic meetings with the Nursing Services on a quarterly basis was an important factor in keeping them informed about library developments and any problems which should be discussed.

It was found that the best way to get patients from the many buildings was to assign specific times to specific wards. The attendants and Building and Nursing Supervisors are the key. It is essential that a structured form of meeting, again on a quarterly basis, be planned for attendants to become aware of the library and its resources. This will likely develop as a cooperative venture of In-Service Training Staff and the Librarian. Opportunities must be made available for the attendants to come to the library with small groups and use the various materials and hardware as well as have some sample library programs presented to them. Those in charge of In-Service Training for attendants bring new attendants to the library as part of their orientation to the Institution. At this time, the purpose of the library and observations of the patients and their response to the materials, programs, and staff are discussed. Informative films used in In-Service Training are shown to attendants in the multi-purpose room

when the facility is not used by patients. This has been done on a few occasions and many of the attendants have come into the library area to browse. Details must be worked out with the In-Service Staff for a more structured programming of library orientation for groups of attendants.

It should be mentioned that those patients who come on a scheduled basis from closed wards are accompanied by attendants. For the most part the attendants who come to the library are very helpful to the library staff in approaching and encouraging patients. It was determined that those attendants who like working with their patients and are interested in visiting the library with them make the visits more meaningful for them. On the other hand, a few attendants from the closed wards are apathetic and hostile to the library environment and staff and appear to be disinterested and punitive toward their patients. For the most part, attendants from closed wards were basically helpful and quietly interested. Contacts with them were helpful and positive.

In some of the targeted open buildings it became increasingly difficult to get patients to the library. This was caused by many factors including lack of initiative by the Nursing Supervisor or attendant personnel. Experiments were made with an attendant accompanying patients from two open buildings, one male and one female, which proved to be a definite asset when the patients have been institutionalized for so many years. This experiment lasted for several weeks and attendance from those buildings went up. Moreover, attendance fell off when the attendants ceased to accompany patients from the two buildings. Yet, more patients did come than at the time preceding their accompaniment by an attendant. It should be noted that the attendants selected were very open and interested and one was actually fascinated with the library materials and hardware. The patients noticeably respond more quickly when they are in a new situation which includes one of their attendants. Seemingly, the above experiment verifies the necessity of having attendants come in small groups to the library to become aware of its resources as part of their In-Service Training.

Another level of staff involvement would be the nursing education programs. Presently, L.P.N., R.N. and U.R.I. student nurses are on the grounds for training in psychiatric nursing. Their involvement in the library works well at times but somehow the channel lacks consistency. Weather is often a factor, as well as priorities established

by the nursing education staff. The rapport between the students and older patients, and how it is reflected in the library, is helpful toward the eventual acceptance of library resources by those patients. Dependence was placed upon student nurses to bring patients from three buildings. If this had not been part of their program, it would have been difficult to get patients into the library from those particular buildings. Presently, the directors of the different nursing programs bring their new students to the library as part of their orientation. Also, two of the three programs have planned student time in the library with patients and the third program involves some students in the library with patients. Working with student nurses on various levels, L.P.N. or R.N., has been most positive and is reflected in the attitude of the patients, as well as that of the students. This also provides the Librarian with an opportunity to expose student nurses, who may eventually work with the elderly in nursing and convalescent homes, to the variety of materials and type of programming to which the confined aged may respond. Explanation of the resources and equipment provided by the Regional Library for the Blind and Physically Handicapped of the Department of State Library Services is given to all student nurse groups. (Talking books and cassette books were not well received and response to these materials requires further exploration.)

The Supervisor of Volunteer Services can also be tremendously helpful in getting patients to the library. This worked in two buildings housing female patients, where we were having poor representation. The effort eventually failed as the nurse in charge of one of the buildings and the attendant personnel would not have any patients ready. This was so even when Motor Pool arranged for bus transport to the library. At this point, the only way these patients will get to the library is for them to come with L.P.N. students when they are assigned to that building. (Patients from another building who came weekly on their own with encouragement of their nurse and/or attendants never came when they were moved to the above mentioned building.) The Volunteer Services will be drawn upon more in the near future since some of the patients have special interests which should be encouraged (i.e., chess) and some of the lonelier patients should have "friends." The Supervisor of Volunteer Services includes the library on any orientation tours which she conducts, including groups of psychology students from local colleges.

It is a good policy to speak at the meetings of the psychiatrists on a quarterly basis which helps to keep them current on library developments. This is when the media presentations can be most helpful. It is an administration policy to reassign the psychiatrists periodically to different buildings, so it is really more fruitful for the Librarian to speak at their meetings since they may be only a few months in the buildings targeted for service.

Working with the Social Services Staff has resulted in new workers and students visiting the library as part of their orientation to the Institution. The Library Staff in cooperation with the Social Services Staff developed a slide/tape presentation which explains and describes the After-Care Placement Program. The slide/tape presentation is used as an orientation and discussion resource for groups of patients selected for this program which tries to settle those who have been institutionalized for several years into boarding homes. The Social Services Staff brings the selected patients to the library for this presentation which is shown in the multi-purpose room. According to reports, this resource has assisted some older patients in accepting the idea of moving to boarding homes.

The Librarian must make contact with other services on the grounds, i.e., cafeteria, Motor Pool, information, florist, maintenance, and housekeeping. Having a working relationship with these and other services helps to make the library operate more efficiently and enables the Librarian to keep the library attractive and comfortable.

As to the Library Staff, it should also be emphasized that staff attitudes are important in working with patients of all ages, particularly the elderly. This is especially so when the age range of the group in the library is mixed. When a young patient reaches out to an older one or vice versa, one is aware of a special warmth in the library. However, the younger people are more demanding and some of the aged patients could, at times, be lost in the shuffle if staff is not alert at all times.

The Library Staff encourages all patients to be independent as much as possible in their library usage. Many patients, new to the library, will explore the bounds of behavior and human inter-relationships. Many will choose a neutral place to sit where they can observe other patients participating in library activities and library staff relating with patients and other Institution

PROCEDURES - CONT.

staff. This is why staff behavior is so critical. Patients are extremely sensitive to behavior and response cues of those in any type of position of "authority". An attitudinal approach by Library Staff has evolved. Basically, patients are accepted as individuals and encouraged to select library activities which appeal to their interests and temperament. The range of individual differences among patients is just as great as with a group of similar size in the community. Encouragement and a positive attitude on the part of the staff are essential in making the library a happy and interesting place. Some patients require more encouragement in order to participate in library activities. The amount of independence, and the statement of preference of patients in their choice of library activities never ceases to amaze the Library Staff.

B. PATIENTS IN TARGETED AGE GROUPS

In developing a program of library service for the chronic, mentally ill aged forty-five years and over, many things had to be determined. It was necessary to distinguish them as a specific population group within the institution community, and to recognize those within the targeted groups as individuals with specific interests and ways of responding to the Library Staff and library enviroment.

Who are the chronic, mentally ill aged, forty-five and over? All that was known about them before the library opened was that they had been institutionalized for several years and that the majority had not completed high school. Furthermore, it was suggested that they be considered more as aged and less as mentally ill. What was discovered about these patients after a year of working with them in the library? Most importantly, it was realized that the chronic, mentally ill aged have the same uniqueness and individual differences as any group of aged in the community. When the patients come into the library to visit the staff is unaware of the variety of mental illness represented. Nor is anything known about their individual backgrounds or case histories. (It was determined at the start of the Project that the role of the Library Staff was to acquaint older patients with resources of the library and to help them reach the point where they could select library activities of their choice and be relatively independent while in the library.)

Older patients varied in the degree and type of mental illness and some were in "good contact", whereas others were a bit uncommunicative, or spoke incoherently or in riddles. Would they like the library created for them? For the most part, yes. The next problem was to arrange or structure library activities in such a way that the variety of individual differences, the many aspects of mental illness, and the different types of patient responses could be accommodated simultaneously. To accomplish this would be the main thrust of a successful program of library service for mentally ill patients of any age.

The chronic, mentally ill aged did respond to the Library Staff, the library environment and activities. They do respond to the printed word and enjoy profusely illustrated books. Especially books about people and places. Furthermore, it was determined that there was tremendous interest in newspapers and magazines. Most of the elderly patients would use the filmstrip machines at one time or another.

Film loops were an interesting curiosity to many and records were enjoyed by all. The wireless headsets were a source of fascination and pleasure to almost all patients who came into the library. Several people color in books with marking pens, make simple puzzles, trace, draw, and write letters and poetry. Needless to say, all of the hardware and materials in the library room were utilized at one time or another on the initiative of the patients. Group programs presented on the large movie screen in the multi-purpose room are enjoyed by almost everybody.

As can be seen, the older patients enjoy a variety of library activities and express many choices while in the library. To give an idea of the variety of people who may be in the library at any given time, a brief description of individual patients and their library choices follows:

Beatrice appears to be about 62 years old and she visits the library with Theresa, a 28 year old chronic mentally ill woman from her building. They come to the library once or twice a day and stay for some time. They apparently are from a closed ward and visit the library while on parole from their ward. Beatrice enjoys listening to music, helps pass out punch, and will look at books with pictures. She will also make simple puzzles with encouragement, as well as write a letter to her sister. Beatrice appears to be a very lonely person and the library seems to offer her a place to go and see people and a place to be busy. She enjoys meeting student nurses and working with them on a simple library activity.

Fred B. visits the library daily from his closed ward. He enjoys listening to music and coloring. It is interesting to note that when Fred, who likes to be called Joe, first used the coloring book and marking pens, he colored like a three year old child and seemed unaware of specific shapes to be filled in. However, on his own, he has gradually learned or remembered to fill in shapes, stay within lines and he is very proud of his coloring. Fred will also look at books from time to time. Moreover, he likes to watch the various presentations on the large screen. Sometimes, Fred speaks incoherently but it must have some relevance to him. However, at other times he makes quite a bit of sense. Fred gave the Librarian a plastic ring from a Cracker Jack box, a gift which she appreciated.

Clifton P., 53, is one of the most refined and distinguished looking library visitors. He visits the library on afternoon parole from a closed area and reads a variety of magazines. Clifton also enjoys music and uses the wireless headsets while reading the magazines of his choice. He has recently joined the group in the film presentation in the multi-purpose room.

Anna, 54, is very bright and articulate and wants very much to return to the community. She visits the library daily and makes use of a variety of materials. Anna looks at books and magazines, listens to records, enjoys the wireless headsets and she also views the programs presented on the movie screen in the multi-purpose room.

Frank C. is 68 years old and has been institutionalized since age 15. At first, Frank would only visit the library for a few minutes and leave. Then he began to come mornings and afternoons for brief periods, selecting books each time. (Frank has mentioned that he cannot read or write.) One day he discovered the film loop projector and he used it for 1½ hours mornings and for 2 hours in the afternoons. He learned to share this with other patients and instructed them in its use. Eventually, he wore the wireless headsets while he worked the film loops. Now, he enjoys sitting in the rocking chair and listening to music with the wireless headsets. He still takes out books every day. Once in a great while, he will look at a presentation on the large screen in the multi-purpose room. Frank once said, "Happiness is coming to the library and listening to music and seeing you."

Vera, 72, is from a closed area. She loves to smoke and nap and might prefer to be on her ward rather than come to the library. However, Vera will browse quickly through books and magazines, as well as enjoy listening to music with the wireless headsets and sometimes sings out loud. The programs on the large screen do not interest her since she promptly falls asleep. It is interesting to note, however, that Vera easily converses with library staff and attendants.

Annie, 66, visits the library on Wednesday afternoons. Annie is very shy and sits in one of the rocking chairs and puts her hand over her face. However, she enjoys listening to music and uses the wireless headsets. Annie will browse through a book once in a while and she will always watch presentations on the movie screen in the multi-purpose room.

PROCEDURES - CONT.

Fern, about 47, is one of our pacers from the closed female building. She is a very pleasant looking woman with beautiful bright eyes. At first, she would not speak to library staff. However, as she became more used to the library environment she began to respond to us. Fern could only sit for the duration of the programs shown on the screen in the multi-purpose room. Eventually, she could sit for increasing periods of time and browse through books and magazines. The wireless headsets were very much enjoyed by Fern. In fact, it seemed easier for her to sit and browse after she was able to simultaneously use the headsets.

Rudy, a friendly man of 63, has been institutionalized for many years. He visits the library every afternoon and reads magazines and newspapers. Rudy also enjoys the programs on the large screen and asks for them each time. Although he rarely listens to records, Rudy sings beautifully. Sometimes, Rudy brings friends to the library.

Raymond, 61, is a very pleasant, chatty individual who has been institutionalized for many years. Also, this man is very lonely and he enjoys the library staff, as well as the student nurses. He plays the roll of the buffoon and will do very little in the library. However, he does enjoy the presentations on the large screen and escorts groups of patients into the multi-purpose room. Raymond also likes to pull the shades down. It is hoped that this pleasant and friendly man will eventually find something more meaningful to occupy his time while in the library.

Leo, 69, visits the library once a day. He enjoys talking with the library staff and spends a great deal of time selecting something to read. His choice includes magazines, large type Reader's Digest, Alfred Hitchcock's Mystery Magazine and a general assortment of books. Leo will not participate in any other library activities, and feels great pride in this.

Imelda, 67, from a closed ward, enjoys books of photographs, especially those with pictures of cats, dogs, and people. Sometimes, Imelda shakes and trembles and seems to lose her breath and other times she is not troubled by this while in the library. At times, she will converse very well with staff or about pictures in a book, whereas, at other times, Imelda prefers to sit close to her attendant and not participate at all.

Arvelous, about 61, also from a closed building loves to visit the library and looks at books. She is attracted by the design and color on the jackets and likes to handle and browse through several at a time. Arvelous also enjoys music and will use the wireless headsets. However, she will not use any of the other equipment. Arvelous enjoys the presentations in the multi-purpose room.

Frank B., 58, a voracious reader of fiction, visited the library daily for several months. He read, listened to music, and used the film loop projector. However, Frank has a prosthetic device on one leg and has some difficulty. Now, he comes weekly and selects about ten books at a time.

Richard E., 57, a patient from a closed ward was noticeable from the start. He appeared to be quite ill and "out of contact." Physically he is a small man and quite thin. For several weeks he just stood in the sun during his library visits. Then we noticed that he took a book and stood with it in his hand. The next week he did the same thing and he also thumbed through the pages. Later, he thumbed through magazines. Richard also always seemed to enjoy sitting in the front row during the group presentation on the movie screen in the multi-purpose room. One day he picked up a headset and put it on. After that he would look through books and listen to music simultaneously. It was noticed that Richard was reading out loud in a quiet voice. The attendant said that he had never seen Richard use any reading matter; nor did he ever show a preference for listening to music on the ward.

These patients mentioned are typical of our many older library visitors.[1]

1. See Slide/Tape presentation of library activities.

RESULTS

SELECTION OF MATERIALS - PRINT MATERIALS - BOOKS

The selection of books for an aging, mentally ill population has been most interesting and challenging. To observe these patients making use of books is fascinating for a librarian. The book collection was developed on the premise that it would be serving an aging population which was also mentally ill: a population which for the most part lacked a complete high school education. Basically, the selection was based on known reading preferences of a general aging population. It was known from previous experience and from articles indexed in Library Literature that the readers would tend toward non-fiction. It would be pertinent to state at this point that elderly patients who utilize books are mostly browsing readers. Since the selection was based on this premise, the book collection is, therefore, mostly non-fiction and tends toward heavily illustrated materials. These include juvenile, YA, and adult materials which can accommodate the tremendous range of individual differences and degrees of awareness.

There is a small 200's section including Bible stories on various levels. In the 300's there are several titles in the area of folklore, holiday materials and a variety of titles on the many aspects of transportation. The 500's section includes a wide selection of materials on animals and nature. These especially reflect the various levels of reading ability and awareness differences. The 600's include additional titles about animals and nature not included in the 500's classification. Also included in the 600's are books on cars, handyman skills, sewing, watches and clocks, as well as additional aspects of transportation. An important subject to have covered in this area would be that of secretarial skills, i.e., shorthand, bookkeeping, filing, secretarial handbooks, as well as simplified shorthand.

The 700's section is really quite extensive and includes books on sports, drawing, art, a wide range of crafts, as well as books about movies, movie stars and profusely illustrated books about dolls and toys. In addition, it includes titles which cover whittling, wood carving, ceramics, and all types of needlework. A general collection of paperback song compilations has been selected. Many patients love to sing and it is hoped to tie the song compilations in with the recreation program.

SELECTION OF MATERIALS - PRINT MATERIALS - BOOKS - CONT.

A wide selection in this section was acquired for several reasons. Most materials in this area are well illustrated and describe a variety of skills which patients may have had or presently practice. Also, the subject matter can be used by Occupational Therapy staff or volunteers for ideas involving projects with patients. It may take time for the availability of this resource to filter down extensively to these related services.

The 800's contain a small general selection of current, simple contemporary poetry in the J, YA and adult range, as well as a variety of books on humor. However, humor does not seem to catch on. Apparently, this could be enjoyed by more sophisticated readers. Much can be done with poetry on many levels, i.e., reading aloud to patients just to listen to the rhythm of the language and to think about the thoughts expressed or in a more structured form of poetry therapy. In the Project certain patients were approached informally just for the fun of reading the simple poetry aloud. These patients were interested and many others browsed in this area.

In the 900's many travel books illustrated with black and white or color illustrations were acquired on all reading levels. Books about people and places seem to be of interest to many of the patients. Moreover, books on the United States have also been popular. The most used books have beautiful photographs of different regions and scenic landmarks. Books on the American Indian are always of interest.

It seems appropriate to state that many non-fiction books were acquired from a remainder jobber where prices were reasonable and the selection offered a tremendous range of subject matter. The savings enabled the Librarian to acquire some rather expensive recently published books dealing with a variety of subjects.

REFERENCE BOOKS

The area of reference needs was a completely unknown territory. A few dictionaries were acquired. The Random House Dictionary of the English Language, Webster's New World Dictionary, deluxe colored edition, Webster's New Collegiate Dictionary, large print edition; and The American Heritage Dictionary of the English Language were purchased. Some

of the more scholarly patients like to trace words in the large Random House, and The American Heritage is a less expensive resource which also gives good derivative information. However, Webster is a familiar name and patients often ask for a Webster's when they are actually asking for a dictionary. The illustrated Webster's New World Dictionary is also of interest to patients who haven't used dictionaries in a long time. More than one dictionary format should be available. Dictionaries which are thumb-indexed should be selected to simplify use.

An Encyclopedia Americana was acquired for reference purposes for patients and library staff. It was considered that this particular encyclopedia would be too difficult for most patients but a resource was needed which would be adequate for those patients who are more intellectually aware. When the library shelving arrived, the encyclopedia was unpacked for the first time and it has been used almost daily ever since. Some seem to open volumes at random and read, whereas others look up information in specific areas.

The Book of Art; a Pictorial Encyclopedia of Painting, Drawing, and Sculpture was acquired as a reference resource to cover the interest in art, artists and periods of art. This is an excellent format for those who enjoy art. The Guinness Book of Records, The World Almanac, and The Dictionary of American Family Names are reference resources which are frequently used. Also, an atlas should be at hand and readily available for people to use. An assortment of local telephone books might also be suggested. Many patients enjoy writing to family and friends in the community and the telephone books would give address information.

FICTION AND LARGE TYPE BOOKS

There are several readers who read fiction exclusively and these include both male and female patients. However, when considering the numbers of older patients who use the library this would not make up one fifth of the book users. However, the fiction readers read more prolifically than do those who prefer non-fiction. Fiction selection includes romance, gothic novels, mystery, adventure, westerns and doctor stories. Many large type, small format books were also acquired. These are enjoyed by all of the fiction readers. The whole area of fiction will be expanded in the final allocation of money. Also

acquired were the Reader's Digest and the N. Y. Times Large Type Weekly which are widely used by readers. An Ednalite, which magnifies print, has been widely used after a slow beginning. However, as previously mentioned, other low vision aids did not seem to work.

PAPERBACKS

A paperback selection was included and the more prolific fiction readers use paperback titles too. These readers also select non-fiction in paper. Those who use paperbacks exclusively chose fiction and non-fiction. Other patients who drop in casually will select paperbacks also. Patients from certain buildings must only take paperbacks since hardcover books never return from those buildings. Additionally, those patients from the closed buildings and wards who read prefer to take paperbacks since hard cover books are usually destroyed or stolen.

Availability of a good general selection of paperbacks would be essential in any institution library. The wide range of interests and abilities of institutionalized people, as well as circumstances demands this. A paperback selection is essential for the use of some readers, to resolve the problems of stolen, destroyed and lost books. In this way, readers will not be penalized for factors beyond their control. Paperback titles reflect subject matter in YA and adult areas. Cartoon books are especially popular in paperback format. Fiction interests are the same in paper as in hard cover and many more titles can be acquired for less money in paper. Most of the fiction buying is in paper.

It is suggested that expensive paperbacks with pictures be avoided since so many paperbacks disappear. The higher quality paperbacks could be shelved with hardcover books and circulated accordingly. A selection of song compilations available in paperback should also be included.

There is one small, sturdy paperback stand where readers browse and select books. The books are placed with their covers out and needless to say, the stock must be added to and changed depending on the volume of use. It should also be stated that the more chronic elderly people are not particularly interested in paperback books. They prefer the hardback non-fiction. This is an example of the necessity of having materials for all interests and preferences. Since any library on the grounds of a mental hospital will attract people of all ages and various

degrees of chronic mental illness, the library must meet this condition in the materials available for use. The selection of paperbacks would be based on the principles of selection of all materials for a library serving a "special clientele."

MAGAZINES

A good general selection of magazines was acquired; they were profusely illustrated and fairly easy to read. Therefore, titles of general interest which would appeal to men and women in an older age group were selected. The selection includes titles about animals, nature, cars, travel, sports, news, adventure, science and mechanics, as well as some of the general titles geared for female readers and movie magazines. The magazines are extensively used and many of the library patrons will only read them. In fact, there are some readers who sit for a few hours at a time in the library and read through several. Other readers just browse among the pictures and ads. However, the format of most magazines is designed to encourage skimming and it cannot be determined at this point, how many of the browsing magazine readers may actually be browsing and skimming simultaneously. Furthermore, we acquired from a paperback jobber several quarterly, semi-annual and annual editions in the area of sports, motorcycles, etc. These proved to be very interesting to many of our male readers who used these materials more readily than the hard cover books on sports. Magazines have many uses beyond their original readership. Pictures can be used for many things such as collages, and picture files can be assembled for future projects. It is obvious that a generous budget for a good selection of magazines is necessary for a patients' library or for most types of institution libraries. A few selections for adolescent readers should be included since the library attracts people of all ages, even when it is established for a certain age group.

SELECTION OF MATERIALS - NON-PRINT

The selection of materials for an aging, mentally ill and isolated population presented many questions. What would the patients be interested in? What would be the average attention span? What would definitely not be interesting? Needless to say, the importance of having the time to cull through multiple audio-visual catalogs and preview a tremendous volume of materials is essential in the selection of non-print for special groups. Some very basic concepts were dealt with, in regard to the basic media.

At this point, some mention should be made of the intellectual process involved in the selection of materials for a project such as this. Materials were selected according to standard procedures of selection. An additional dimension was included in which the selector tried to break down some of the thought processes involved in using the materials successfully, i.e., with puzzles - color discrimination, shape and size of pieces, and picture configuration. Imagination and intuition are involved in selecting materials for special groups. The Librarian must allow for enough time to select and preview a tremendous amount of material. In a library serving a special clientele, it may be necessary to custom design some programs using non-print materials. Slides of local malls, airports, stores, neighborhoods with accompanying tapes may be designed for use in programs which describe changes in the local community. Much depends on the imagination of the Librarian and the type of equipment and materials available for use.

FILMSTRIPS

First of all, consideration must be given to the subject matter. In this case, would the subject matter be of interest to older persons? Are the materials up to date? The quality of photography or drawing is also extremely important since it can vary from poor to excellent. Additionally, the photographic qualities of older materials are never as good as those which have been recently produced. Cassette kits are preferred to record kits for the obvious reasons of size and portability and the quality of narration should always be considered. The voice should be well modulated and the narration properly paced for general listening. During previewing of materials, it was amazing to listen to the variety of voices and quality of narrations. In fact, some kits with good filmstrips had terrible narrations, and vice versa.

The length of presentation is quite an important factor to consider. Filmstrip programs for the most part, should not be more than fifteen minutes, unless they deal with special subject matter, i.e., Christmas materials. If the photography of the filmstrip is of good quality, and the subject matter is interesting, the filmstrip will hold interest, even if a little too long. Also, if the narration is good, but the text is a little technical, it will still hold interest if photography is good. Also, those filmstrips which are silent/captioned can be used for small group presentation and discussion and were found to be particularly useful in working with up to five or six people. They should not be too long if discussion/comments are used throughout. Captioned films with or without sound are apparently no drawback since some of them are shorter and are interesting to the slower patrons or to new patrons.

Filmstrip kits which offered consistent quality and the most diversity were produced by S.V.E., Imperial Film Company, McGraw-Hill, and Guidance Associates. The Encyclopaedia Britannica, Eye Gate, and Colonial Williamsburg offer many good kits in certain subject areas. Furthermore, some very interesting filmstrips on Bible history and people of Biblical times were obtained from Visual Publications.

Many patients utilized the two filmstrip machines which have rear screen capability. They are particularly interested in the Superviewer (Viewlex) in which the filmstrips are automatically tripped by impulses on the accompanying cassette narrations. The Previewer Senior (Viewlex) is also used frequently and the filmstrip sequences are changed manually by the patients. Captioned silent filmstrips are used on this machine. Also, a playback cassette unit is utilized with those kits which have cassette narrations.

Patients particularly enjoy having a filmstrip program in the library multi-purpose room. During these presentations the filmstrips are shown on a large size movie screen and the larger cassette recorder/playback unit is used for the accompanying narration. A speaker from the stereo unit is jacked into the tape player and the resulting sound reproduction is quite good. Filmstrip programs about interesting people, places, and things are enjoyed. Two excellent filmstrip series should be mentioned at this point. One is entitled Focus on America, which is published by S.V.E.. The other is published by Encyclopaedia

Britannica and produced by the National Geographic Society and deals with many countries. These two series have evoked the most response from our patients.

Several patients select the filmstrip machines as their favorite choice of library activities. Older people will often hesitate in assuming initiative in equipment usage. They do not want to break anything and they must use equipment often and consistently to be comfortable with operating it independently. This anxiety is eventually overcome as the individual becomes more confident in his experience with the equipment and materials. At first, patients prefer to be assisted with the equipment and after a few times, they will try to function independently They do require constant encouragement to make use of filmstrip materials and this is where the attitude of the Library Staff is so important. Moreover, other patients will use filmstrip materials after they use the more familiar books, magazines, and records. Filmstrip machines are used by individual patients, as well as by groups of two to five people. These groups may be friendship groups or they may consist of people who just happen to be in the library at the same time.

Changing placement of small rear screen equipment is really limited since the brightness or angle of the sun can eliminate the projection capabilities of the rear screen. Placement of a filmstrip machine and a film loop machine was reversed from one side of the room to the other. There was no noticeable change in usage. However, when these machines were in the far end of the room they were not utilized at all. For this equipment to be too far removed from the base of the Library Staff would be counter productive. This applies doubly to the placement of the phonograph in patients' libraries.

RECORDS

In developing a collection of records for older people it is important to have all types of music represented. It is perhaps best to begin with a small selection to see what is popular. Recorded music is very popular with the patients and the phonograph is one of our most important pieces of equipment. Obviously, headsets and jackboxes are a necessity in using recorded media in the library. The record collection includes a general selection of most types of music including the Beatles, ballads, country and western, mood music, jazz, instrumentals and some classical music. The patients enjoy music tremendously and they like to select their choice of a record.

A wireless antenna is strung around the library room which enables patients to listen to phonograph music with wireless headsets in all parts of the library. Therefore, they are not rooted to the phonograph. People can wear headsets and make puzzles, read books and magazines, or sit in a rocking chair and listen. Needless to say, the phonograph and wireless headsets are constantly used and are an important, integral part of our library.

FILM LOOPS

The selection of 8mm film loops offers a variety of subject matter. The first selection acquired included several film loop series published by Ealing, which dealt with such subjects as undersea life, American Indians, contemporary city life, pioneer crafts, other crafts, and interesting places such as the Grand Canyon and Niagara Falls. At first, response was good and then it tapered off. The film loop projector had been placed in an area of the library which had the least amount of traffic. Eventually, the projector was moved to an area nearer the center of activity. Now it is frequently used for long periods of time. Later, a good selection of Disney film loops was acquired which included loops about animals and nature. The patients especially enjoy looking at those of wild animals, animal babies as well as birds, especially the exotic ones.

Film loops must be previewed with great care and imagination must be used to determine how useful they can be. Several film loops were dark and many about places were dated. The quality of photography should also be considered. Film loops run up to four minutes, which is plenty of time when using them. The cost of film loops is so great that one should have a good idea of what is hoped to be accomplished with them before investing. A film loop projector with a rear screen was selected because it would be self-contained and usage would not be dependent upon screens. Our men seem to enjoy using this machine more than our women. The film loop projector seems especially good for those patients who are retarded or for those who would potentially break other equipment. Film loops offer a good medium for discussing simple concepts with certain patients while the film is running. The lack of narration is no handicap to this type of presentation, since the film frames are constantly changing. One reason for resistance to this medium could be that more is demanded of the person using it. It has been noticed that certain people act as catalysts in the acceptance and usage of certain media, i.e., film loops

and filmstrips. If budget permits, a film loop projector with a rear screen and collection of film loops is recommended for a library such as ours. However, other types of audio-visual hardware and the related materials should be considered as first choice purchases.

ART REPRODUCTIONS

A selection of art reproductions produced by the New York Graphic Society was made. Many factors were included in the choice, especially the value for discussion with people of the general background of the patients using the library. Several paintings of the people were selected, including a dancing couple, children, a portrait of a black musician, people sitting in a park, and people walking. Several seascapes and boat scenes were chosen since everyone in Rhode Island is familiar with the ocean. Some circus and carnival paintings were added because the circus was an exciting summer event at the time our elderly patients were children and adolescents. Two American primitives were chosen to evoke the simplicity of life in times past. Also, a contemporary painting of flowers was selected because many people enjoy such paintings. A still-life of food was included because it could evoke discussion about happy events surrounding food, i.e., home holiday celebrations, etc. On the other hand, a painting by Brueghel was selected because so much activity is depicted. Two winter scenes and a fall scene were included for seasonal interests, as well as for the remembrance of growing up or living in rural areas.

The large multi-purpose room provides a generous space to hang them and good quality reproductions add to the attractiveness of the library area. Many of the patients remark on the different paintings and often walk around the room looking at them. They particularly enjoy the seascapes and rural scenes, and they seem to like the pictures of people. In general, the selection is enjoyed and awareness is expressed about the way the paintings are arranged.

PICTURE CHARTS

A large selection of picture charts was acquired for hanging in the library room. These pictures are changed seasonally or more often and patients express pleasure and/or awareness of the many different pictures. There is a large room divider made of pressed cardboard and pictures are tacked on it as well as on the walls. American Indians, fall/winter scenes, birds, and spring flowers,

SELECTION OF MATERIALS - PICTURE CHARTS - CONT.

and animals have been of particular interest. Patients assist in arranging and hanging these. Picture charts published by S.V.E. seem to be the most diverse and the photography is excellent. These should be previewed to determine that each series is suitable for the desired purpose. Elderly patients are very visually aware and enjoy having things hung on walls and bulletin boards. They are also aware of visual change and many seem to appreciate visually and aesthetically when such change occurs. (This is a fact which is definitely important for elderly people living in confined situations.)

SEASONAL/HOLIDAY DECORATIONS

Mention should be made that seasonal and holiday decorations are additional visual aids which are enjoyed by older patients and they also help make the library an attractive, welcoming place. Some of these decorations can be made and others can be purchased. Holidays mean a great deal to institutionalized people and the decorations add to their pleasure.

8MM FILMS

Several comedy classics were acquired in 8mm film including films of Laurel and Hardy, Charlie Chaplin, W. C. Fields, and Buster Keaton. Almost immediately patients were able to laugh out loud and tell us how much they enjoyed the films. Laurel and Hardy are favorites and some patients who say very little ask us if they will be able to see Laurel and Hardy. Moreover, they will watch two reel films which last 30-35 minutes. We have noticed that many patients are able to anticipate humor in the 8mm comedy classics. It is not known if this is an ability which evolves with exposure and/or repetition. In developmental reading skills, the ability to anticipate the plot of the story is considered a significant skill to have. People laughed more frequently as they were increasingly exposed to more films.

There is tremendous fascination for the films of Chaplin. His movies are more sophisticated than the comedies of Laurel and Hardy. The patients enjoy the slapstick situations, but many seem to appreciate the aesthetic qualities of Chaplin's style and pantomine. W. C. Fields is also enjoyed but his dialogue is fast and the sound tracks are a little blurred.

It is essential for the Librarian to enjoy and appreciate film if film programs are to be shown in the library.

Films should be introduced and pertinent points mentioned before the film is shown. The introduction is one reason why patients enjoy the 8mm silent films as well as those with sound and this introduction apparently makes the difference.

16MM FILM

The use of 16mm film in the Project has been a tremendous asset and the accessibility of the R. I. Library Film Cooperative has certainly been indispensable. The film collection which is available through the Film Cooperative is excellent and established procedures make the collection readily available. Film programs run from 20 to 50 minutes, depending on the library period and the selection of films. Films shown are entirely of a recreational nature. Patients, especially the aging ones, enjoy good films and respond to them as delightedly as do others in the community. They are particularly receptive to the variety of contemporary film productions in the 16mm format. Films which are made up of the components of excellent photography, and interesting subject matter, cannot miss with our people. The following are examples of types of film which are enjoyed:

1. The animated cartoons produced in Czechoslovakia are great favorites since the situations described are humorous, satirical, and offer superb techniques of animation.

2. Short films of photography of interesting subjects combined with a catchy musical background are much enjoyed.

3. Breathtakingly beautiful films of a variety of sports activities such as sky diving, surfing, dunebuggies, and skiing combined with music.

4. Films which are almost parables such as the Golden Fish and the Red Balloon.

5. Those films which tell a simple story about first love and Nicky and Rock, a film about two sheep dogs.

The previewing of films to be shown to such groups is essential and time need be arranged for film previewing in the library routine. The introduction to the film is of tremendous importance in presenting a film program to a group of people who are mentally ill. Patients enjoy having

interesting points about the film highlighted before it is shown. This adds to their ability to comprehend what they are seeing, but more importantly, it puts their film watching on a level of the aesthetic.

GAMES AND PUZZLES

Experiments were done with a variety of simple games and puzzles. One of our simplest was an assortment of coloring books suitable for adults. These included pictures to color of subject matter such as North American Sea Life or The Dinosaurs, as well as a brief descriptive text opposite the page to be colored. Also purchased were marking pens made by Creative Playthings which seem to last longer and are a good size for gripping by elderly people. Other things such as the Etch-a-Sketch and kaleidoscopes are used quite frequently. They are left in obvious places in the library for the patients to discover. Lady Bug Dominoes were enjoyed by many women. Any game involving two or more people must always be initiated by a student nurse or Library Staff member. Puzzles consisting of 48, 64, or 100 pieces were enjoyed by many people in the library and they could be completed within ½ hour. The pieces in the Springbox puzzles are large enough to comfortably hold while determining where they are to be placed. It was found that the pictures on the puzzles were quite significant to our older patients. For instance, upon completion of a 48 piece puzzle of two kittens and a goldfish bowl, an elderly woman might say, "Aren't they cute!" and then she might smile or laugh softly. They also respond to the overall color of the picture puzzle. Even these simple puzzles have subtle visual discrimination cues and configurational complexities. The wooden puzzles of the map of the United States have been completed by many older patients, all men. It is amazing how much geography has been remembered. Product cues, state capitols, size of the states, and regional references seem to be remembered by many of our older men. It is interesting to note that our younger visitors have never completed this puzzle of the map of the United States.

Also, some of the older people made use of the simple games which consisted of geometric shapes which fit into each other. The function of simple games and puzzles in our library was only to offer a choice to people who might like to try something a little different. Attention span, poor vision, and coordination and shaking hands must be considered when selecting games and puzzles

for a group such as this. Furthermore, the skills drawn upon in utilizing these materials, relate in different ways to skills necessary for reading the printed word.

RESULTS - PROGRAM SERIES

The most successful program series was done in conjunction with the Looking Glass Theater. The professional actress, Mrs. Nancy Pereira, spent time in the library observing our elderly patients and their responses to the library staff, materials, and film programs in our multi-purpose room. She also met with the Associate Hospital Administrator and Chief Psychologist. Needless to say, it is necessary to properly orient people from the community who are going to provide special programs for patients, especially the elderly. Time for observing and discussion with library staff and other institution staff must also be planned in the scheduling of special programs.

The first program involved four members of the troupe, as well as a few patients, in a simple play about a tribe of American Indians. Patients made some pemmican, ground corn and stood guard over the tribe's horses. Another program included a well planned presentation adapted from the Zolotow story, Mr. Rabbit and the Lovely Present, which began as a story presentation, using acetate drawings of the original illustrations projected on the screen by an overhead projector, developed into a search for fruits to make the birthday basket. This basket was then presented to the Librarian as though it were her real birthday. A full blown party ensued with guessing hidden contents in bags, as well as the ritual of placing candles on the cake, lighting them and general party feasting.

Some programs dealt with the telling of traditional folktales based on storytelling principles with audience participation, as well as a variety of simple acting techniques. For instance, in one of the stories, the main character sold fish. Mrs. Pereira made paper origami fish and proceeded to hawk these fish to the audience. The audience spontaneously became customers asking to buy fish. Another story dealt with an old man who sold hats. While walking home through the snow he placed his unsold hats on the heads of some statues. In this case, the storyteller pasted a paper hat onto a simple drawing of a row of statues. Many people in the audience pasted hats on the drawing of statues. This simple participation in a concrete task furthered the action line of the story. In many cases, patients initiated response. It became quite evident that storytelling and simple participation are enjoyed by older patients and should be considered in library activities involving elderly people in the community.

RESULTS - WORKSHOPS

One of the original objectives was to hold workshops for librarians and others who would be interested in the use of the library by elderly, chronic mentally ill people. On March 28, a workshop was held for librarians in the community who work with elderly people. The purpose and goals of the Project Library were described, as well as what had been determined about the response to the library, library materials, and staff. The librarians also mixed in the library with patients. They did mention that our elderly patients are quite different from the elderly they serve. Also, they expressed interest in the variety of materials within the library.

Another workshop was held on April 25, for the Regional Library Coordinators. The Project Director and Project Librarian described the Project, its purpose, and some of the trends in library use by elderly patients which were evident. Questions were asked and background on institutional life for those patients forty-five and over was provided. Our third workshop was held on May 18, for the branch librarians from the Providence Public Library. The group upon arrival was interested in looking at materials and in observing and talking with patients. The Project Director and Project Librarian later explained the goals and purposes of the Project and what had been accomplished. This group was tremendously responsive and more media oriented than any of the others.

The fourth workshop was held in the Project Library on June 12, for the Task Force on Library Services to the Homebound. This group had never been exposed to institutional life and seemed quite upset by it. The goals and purposes of the library were described, as well as patient use and response to the variety of materials and program format.

A fifth workshop was held in the library on September 18, for institutional librarians and consultants from the New England states and New York. In the morning the Project Library was discussed and two media presentations were given: one a slide/tape presentation on the development of the library, and a transparency/tape program on how specific elderly individuals use the library. Both presentations were devised as an orientation vehicle for groups visiting the library for the first time. Consultants representing the different states described their programs and problems at the end of the morning. In the afternoon specific details about the development of other institution libraries in Rhode Island were given in talks

and slide/talks. This group was very responsive and their questions and comments were helpful to the Project Librarian. Some of the questions and comments helped in formulating ideas for the Final Report in the areas of the selection of materials, recommendations, and the emphasis on individual differences.

CONCLUSIONS

In the section of this report which deals with the selection and use of materials for an older, chronic, mentally ill population some specifics of the actual program are described. However, it is important to note that the most significant point about a library service for this type of population is that it cannot be as structured as originally conceived in our Proposal. Originally, we stated that the Project would involve the possibility of at least four alternative models of service.

1. Programs involving the use of chiefly print materials.

2. Programs using film and print materials.

3. Programs involving patient interest. (Speaker type, involvement type hobbies, nature, craft, etc.)

4. Programs involving arts interest. (Speaker type, involvement type music, art, drama, etc.)

For the most part, the preceding models became impossible to test, due to the variety of individual differences, diversity of patients' response as well as the different ways in which mental illness was manifested by the patient. What had to be devised, therefore, was a "Super Model" in which the library staff could structure a library service which could accommodate these tremendous differences and responses in a chronic, aged mentally ill population. However, in the selection and use of materials, we did incorporate the use of print materials and a variety of film formats. Additionally, the materials and presentations were based on patients interest and overall ability to comprehend and respond.

Furthermore, it was found that grouping was irrelevant, as was the amount of education. The Staff also determined that our older patients required much more time than six weeks to fully become aware of what the library could offer them. In effect, a program of library service was structured which offered a variety of activities and choices which would appeal to the wide range of individual differences. Moreover, one of the overall goals was to have our elderly people using library resources independently.

CONCLUSIONS - CONT.

It became obvious that building visits would have to be made to get more people into the library from open areas. It must be stated that the "outreach" effort to the buildings involves tremendous lugging and hauling of projection equipment, etc. This may not be much for a man, but it is extremely awkward for a woman. The 16mm projector which weighs about fifty pounds is even heavy for a man to carry. The buildings are back from the parking area and the film program may be presented at the far end of a very long building. Therefore, library staff may be walking up to 100 to 135 yards to the building and back carrying heavy and awkward projection equipment, extension wires, films, etc...

With the cooperation of some building staff, patients can be assembled for programs in their buildings. However, it often happened where, after lugging everything in, very few patients would be available for the program. These programs run from 30-40 minutes and the patients can become familiar with the library staff member and with examples of materials and programs available in the library. This definitely helped get patients from some open buildings into the library. It is suggested that building visits be made in a weekly series of 4-8 weeks. After that, an attendant should be assigned to accompany a group of patients to the library from that building.

In another building, materials other than film were used. In one building, the R.N. arranged for a visit to a different ward each week. The attendant from that ward was present during this visit. Women from other wards were encouraged to go to the selected ward too. At this time, a sample of magazines, books, puzzles, and simple games were described. Each time, the patients were reminded of the existence of the library and the library hours. Many of these patients began to visit the library. There was to be a direct correlation between library staff visits on a weekly basis in certain buildings and getting some patients into the library from those buildings. Of course, this was totally dependent on staff involvement and cooperation with library staff. However, the library staff must decide how much of this can be done without spreading itself too thin. This is why a limited number of visits is suggested in open buildings with the end result of an attendant being assigned to accompany patients from that building to the library. The point is eventually reached where building visits can be counter productive to the functioning of an active on-going central library for patients.

RECOMMENDATIONS

1. It is imperative that the Librarian have a definite place on the administrative team which is essential for two-way communication between the Librarian and administration of the institution. This would include attendance at regularly scheduled meetings which would provide the Librarian with the opportunity to inform administration about developments, problems, and plans, etc.

2. The administration must be made aware that the Librarian can offer more effective service to patients if the library is not limited to print materials. Simple puzzles and games, recordings, coloring books, etc. are not the sole province of O.T., recreation or the many "therapies" which may exist. A variety of non-print materials can be legitimately used in the library since skills necessary for successful usage relate to the skills necessary for reading activities.

3. The selection of print materials should include books, paperbacks, newspapers, and magazines. In general, illustrated non-fiction on all levels seems to be preferred to fiction with older readers. A variety of magazines of a light and general nature are enjoyed but scholarly and literary magazines are not utilized. The local newspaper, The National Observer, and The N. Y. Times Large Type Weekly are the papers offered in the library.

4. A diverse selection of non-print materials should be available for use in the library for general programs involving groups of patients, as well as for specific programs for individual patients. In this way, the wide range of individual differences can be accommodated.

5. This necessitates a realistic budget allocation. A fair allotment of money would provide the Librarian the necessary financial sources to diversify into non-print materials. The amount of money would depend on the library's present resources.

6. Librarians working with patients must break the barrier of the concept of "traditional" librarianship when developing library service for exceptional people.

7. A library for an exceptional clientele must offer adequate and attractive space for function, diversity of programs offered, and comfort.

RECOMMENDATIONS - CONT.

8. The structure of the over-all library program should allow for the tremendous range of individual differences among the patients in ability to function, age, intellect, and mental illness.

9. Special efforts must be made with the staff of each building targeted for service to assure that patients will be encouraged to attend the library. (This should also include the hanging of posters advertising the library in places where patients would be most likely to observe them.) The chronic, mentally ill aged are quite apathetic and often require encouragement by building staff to become involved in activities outside their residential buildings.

10. When the library is open for people of different ages and from different buildings, it is of great importance that the interests and requests of the elderly patients do not get lost in the constant barrage of demands from the young.

11. Scheduled visits from the different buildings will be necessary to further assure that those who are older can receive the interest and attention of the library staff, as well as to be able to freely use the materials and hardware.

12. The Librarian should arrange to have the patients' library tied into existing inter-library loan procedures to obtain subject and title requests which are not currently available. It's suggested that materials borrowed for patient use be utilized in the library.

MC-136

State of Rhode Island

INTER-DEPARTMENTAL COMMUNICATION

November 29, 1973

TO: Miss Deirdre A. Donohue

DEPT: Library A. Building

FROM: E. F. Socha

DEPT: Psychology Dept.

SUBJECT: A statement about the Library Project for inclusion in the Final report to the Office of Health, Education, and Welfare

Although comprehensive care is being provided to large numbers of the mentally ill, the extent of its availability and applicability to chronic schizophrenic patients is less than optimal. There is a pressing need for more aggressive and innovative programs to reach these chronic schizophrenic patients whose illness tends to be refractory to traditional treatment modalities. It is my professional opinion that the IMH Library Project makes a significant therapeutic contribution to our large chronic schizophrenic population by providing intellectual stimulation in a variety of forms ranging from the traditional books and magazines to the newer materials such as film-strips, media kits, and audiophonics.

Elizabeth F. Socha, M.A.

Elizabeth F. Socha, M.A.
Chief Clinical Psychologist

ES:gh

EXHIBIT 1

MODEL - PEOPLE (1)

Group(s) of those with grounds privileges from Dix and Pinel. (These may also be part of the Behavior Modification Program.)

MODEL - PEOPLE (2)

Group(s) from Dix and Pinel not involved in Behavior Modification Program. (Ground or no-ground privileges)

MODEL - PEOPLE (3)

Group(s) participating in the "Stimulation Therapy" program.

MODEL - PEOPLE (4)

Group(s) of those patients considered to be motivated.

Will they be able to work independently in the library? Can mentally ill people who are motivated also be passive and withdrawn?

MODEL - PEOPLE (5)

Group(s) of more withdrawn patients.

Are they able to work independently in the library? One-to-one? How do the particularly withdrawn patients respond to programs in which they are directly involved?

MODEL - PEOPLE (6)

Group(s) of motivated patients mixed with passive, more withdrawn patients.

MODEL - PEOPLE (7)

Group which definitely prefers print, or is most ready to accept books and reading. (These patients will probably be selected from other groups with whom we deal.)

MODEL - PEOPLE (8)

Those who have achieved high school graduation and beyond. (This model may come later in the program since the people may be selected from among those exposed to library programming.)

EXHIBIT 1 - CONT.

MODEL - PEOPLE (9)

Those patients who have achieved education of grade 10 or less.

Are their interests and responses to programs, materials and subject matter in some way different from those with higher educational achievement?

MODEL - PEOPLE (10)

Group(s) involving direct contact with other services, i.e., O.T., etc.

MODEL - PEOPLE (11)

Comparison of responses of groups with mixed sexes compared to responses to similar programs by groups of same sex. (Groups would probably come from same type of building.)

MODEL - PEOPLE (12)

Does length of time confined effect patients' response to library programs offered in different formats?

MODEL - PEOPLE (13)

Special project for those who are more tuned in to using the library.

1. Use as aides.
2. Write brief reviews
3.

EXHIBIT 1

MODEL - PROGRAM (1)

Changes in Rhode Island

Week 1 Malls
Week 2 Changes in cities and towns including urban renewal, schools, libraries, housing for elderly, shopping centers.
Week 3 Highways and roads
Week 4 Airport
Week 5 Interesting people (slides of people)
Week 6 Interesting places in Rhode Island

MODEL - PROGRAM (2)

Information of topical interest to individual groups of people - mixed media.

Week 1
Week 2
Week 3
Week 4
Week 5
Week 6

MODEL - PROGRAM (3)

Programs involving patients' interests, i.e., nature in general.

Week 1	Plants and trees in R. I. accompanied by slide presentation.	Speaker
Week 2	Nature walk	Involvement
Week 3	Time-lapse photography-flowers	Speaker
Week 4		Involvement
Week 5	Ocean life	Speaker
Week 6		Involvement

MODEL - PROGRAM (4)

Programs involving print materials

Week 1 Discussion of interesting books
Week 2 Discussion of what is in the newspaper, how newspapers are organized.
Week 3 Discussion of a variety of magazines - subject matter, articles of interest, how magazines are organized.

EXHIBIT 1 (CONT.)

MODEL - PROGRAM (4) - Cont.

Week 4 Book discussions
Week 5 Newspaper discussions Patient participation encouraged
Week 6 Magazine discussion

MODEL - PROGRAM (5)

Programs involving multi-media presentations.
(Overall theme)

Interesting People and Places

Week 1 Filmstrip-cassette combination
Week 2 Talking books/cassettes
Week 3 16mm films
Week 4 Film loops
Week 5 Slides
Week 6 8mm films

MODEL - PROGRAM (6)

Programs involving films and print

Week 1 People
Week 2 Places
Week 3 Animals
Week 4 Nature
Week 5 Art
Week 6 Sports

MODEL - PROGRAM (7)

Programs involving simple crafts and library materials.

Week 1 Small project-decoration for table next to bed, i.e., arrangement of dried flowers.
Week 2 Collage - from picture cut-outs, fabrics, etc.
Week 3 Mobiles/Stabiles
Week 4 Design greeting/holiday cards
(Will allow 2 weeks if they want or need the extra time.)
Week 5 Holiday decorations for their table or day room.
Week 6 Simple books - pictures, fabrics, etc., paste, rings, and give for use by the retarded.

EXHIBIT 1 - CONT.

MODEL - PROGRAM (8)

Programs involving staff
(Different personnel level mixes - those staff members who would like to actually participate, i.e., attendants who accompany groups from closed areas.)

Week 1 Include poetry therapy
Week 2 Film loops
Week 3
Week 4
Week 5 Records
Week 6 Film program, i.e., animated films made by Mr. R's students.

MODEL - PROGRAM (9)

Programs involving arts interests

Week 1 Photographer - Discuss his interest in photography. Display and discuss favorite photography (not from technical point.) — Speaker
Week 2 Cut-out pictures from magazines of people, places and things which are interesting to them. — Involvement
Week 3 Artist or person interested in art brings some favorite painting and discusses simply why he enjoys it. — Speaker
Week 4 Part of one group selects simple books on art which might be of interest to other patients. Have other half of group look at slides of different paintings and select some to present to their group or another one. — Involvement
Week 5 — Speaker
Week 6 — Involvement

MODEL - PROGRAM (10)

Unstructured library activities. (How unstructured?)

Week 1
Week 2
Week 3
Week 4
Week 5
Week 6

EXHIBIT 1 - CONT.

MODEL - PROGRAM (11)

Programs for groups who can't leave their residential buildings.

Week 1 16mm films
Week 2 Slide presentation
Week 3 Books
Week 4 Records/jack plugs
Week 5 Film loops
Week 6 8mm films

MODEL - PROGRAM (12)

Mixed Media

Week 1 Transportation
(How people get around today compared with how people used to get around)
Week 2 Buying things
(Reminiscence about buying and shopping, comparison of Sears Catalogs)

EXHIBIT (2) RHODE ISLAND

DEPARTMENT OF STATE LIBRARY SERVICES

INSTITUTE OF MENTAL HEALTH

EVALUATION CHECKLIST FOR SPECIAL LIBRARY PROJECT

PATIENT'S NAME_____ DATE OF BIRTH_____

DATE OF ADMISSION_____

1.	Is friendly with other patients.	YES____ NO____
2.	Shows interest in activities around him.	YES____ NO____
3.	Can be encouraged to participate in activities.	YES____ NO____
4.	Participates in activities on own initiative.	YES____ NO____
5.	Has job assignment.	YES____ NO____
6.	Reads on ward.	YES____ NO____
7.	Discusses library or its resources with others.	YES____ NO____
8.	Visits library during free periods, 2:15--3:45	YES____ NO____
9.	Noticeable behavior change as result of library visit.	YES____ NO____
10.	Able to concentrate. (Not distractible)	YES____ NO____

REMARKS:

EXHIBIT (3) RHODE ISLAND

DEPARTMENT OF STATE LIBRARY SERVICES

INSTITUTE OF MENTAL HEALTH

EVALUATION CHECKLIST FOR SPECIAL LIBRARY PROJECT - PROJECT STAFF

PATIENT'S NAME_____ DATE OF BIRTH_____

DATE OF ADMISSION_____

1.	Is friendly with other patients.	YES____ NO____
2.	Will work independently in the library.	YES____ NO____
3.	Articulates interest in specific programs or materials.	YES____ NO____
4.	Shares activities in the library with others.	YES____ NO____
5.	Appears interested in specific subject areas.	YES____ NO____
6.	Able to concentrate. (Not distractible)	YES____ NO____
7.	Enjoys library resources.	YES____ NO____
8.	Makes use of a variety of library materials.	YES____ NO____
9.	Makes use of variety of library equipment.	YES____ NO____
10.	Participates actively in the program.	YES____ NO____

REMARKS:

EXHIBIT (4) PROJECT LIBRARY DAILY PROGRAM EVALUATION

Date_____ Type of Program_____

Program No._____

Number Attending_____

Names of Attendees

1._____

2._____

3._____

4._____

5._____

6._____

7._____

8._____

9._____

10._____

REMARKS:

Signature_____

EXHIBIT 5

RANDOM SURVEY OF THE EDUCATION LEVEL OF 200 PATIENTS IN THE PROJECT LIBRARY PROGRAMS

Grade Achieved	Number	%
12th Grade or Over	24	12
*11th Grade	14	7
10th Grade	14	7
9th Grade	10	5
8th Grade	40	20
7th Grade	10	5
6th Grade	34	17
5th Grade	24	12
Below 5th Grade and Unknown	30	15

*Median level of education in R. I. 1970 Census